



**ACT**  
Government

**ACT Health**



## Health Protection Service

# Food Business New Registration

Use this form to apply for a Food business Registration under the **Food Act 2001**.  
View the Act and its regulations at [legislation.act.gov.au/a/2001-66/](http://legislation.act.gov.au/a/2001-66/)

## How to complete this form

Please read the Food Business Registration Information Sheet at [health.act.gov.au/businesses/food-safety-regulation/starting-food-business](http://health.act.gov.au/businesses/food-safety-regulation/starting-food-business) or call the Health Protection Service on 02 5124 9700 before applying.

Complete this form using a black or blue pen and return to the Health Protection Service with the appropriate fee (see Section I).

This form may also be completed online and the fee paid via a secure payment portal at [forms.act.gov.au/smartforms/hps/food-business-new-registration-application](http://forms.act.gov.au/smartforms/hps/food-business-new-registration-application)

## Attachments

This form requires you to submit attachments as part of the lodgement process:

- One form of photographic identification for each owner (or for the registered agent if applying as a company).
- If applying as a company - a current company extract (issued within the previous 30 days) from the Australian Securities and Investment Commission ASIC).
- Plans and details of your fit-out (see Section H).
- If applying for a fee exempt application, evidence of fee exempt status is required.

## Contact us

### Health Protection Service

Email: [hps@act.gov.au](mailto:hps@act.gov.au)  
Phone: 02 5124 9700  
Fax: 02 5124 5554

By post: Locked Bag 5005  
WESTON CREEK ACT 2611  
In person: 25 Mulley Street  
HOLDER ACT 2611

## Privacy

The collection of personal information is required for the purposes of issuing a registration under the *Food Act 2001*.

The Health Protection Service prevents any unreasonable intrusion into a person's privacy in accordance with the *Privacy Act 1988 (Commonwealth)*.

If you have questions about how your information will be handled, please see the ACT Health Privacy Notice at [health.act.gov.au/privacy](http://health.act.gov.au/privacy) or contact us.

## Need an interpreter?

To speak to someone in a language other than English please telephone the Telephone Interpreter Service (TIS) on **131 450**.



بالرقم إتصل مترجم إلى بحاجة كنت إذا Arabic: 13 14 50 :

Chinese: 如果您需要翻譯, 請致電 : 13 14 50

Croatian: Ako trebate tumača, nazovite: 13 14 50

English: If you need a translator, call 13 14 50

Greek: Αν χρειάζεστε διερμηνέα, τηλεφωνήστε: 13 14 50

Italian: Se hai bisogno di un interprete, chiamate: 13 14 50

Maltese: Jekk għandek bżonn ta 'interpretu, sejha: 13 14 50

است لازم شما اگر Persian: 131 450

Polish: Jeśli potrzebujesz tłumacza, zadzwoń: 13 14 50

Portuguese: Se você precisar de um intérprete, ligue para: 13 14 50

Serbian: Ако треба тумача, назовите: 13 14 50

Spanish: Si usted necesita un intérprete, llame al: 13 14 50

Turkish: Eğer bir tercümana ihtiyacınız Arama: 13 14 50

Vietnamese: Nếu bạn cần một thông dịch viên, xin gọi: 13 14 50

## Section A: Trading details

### Trading name

What will your business be trading as? This is the name that your customers will know the business as and is usually displayed on your storefront and signage.

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### Food business type

What type of food business are you planning to operate? (Select only 1 option)

- |                                                            |                                                          |                                             |
|------------------------------------------------------------|----------------------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Aged care                         | <input type="checkbox"/> Home business <b>(1)</b>        | <input type="checkbox"/> Night club         |
| <input type="checkbox"/> Bakery                            | <input type="checkbox"/> Hospital kitchen                | <input type="checkbox"/> Poultry            |
| <input type="checkbox"/> Butcher                           | <input type="checkbox"/> Hotel or motel                  | <input type="checkbox"/> Pub or tavern      |
| <input type="checkbox"/> Canteen                           | <input type="checkbox"/> Ice-cream                       | <input type="checkbox"/> Restaurant or café |
| <input type="checkbox"/> Caterer                           | <input type="checkbox"/> Licensed club                   | <input type="checkbox"/> Retailer           |
| <input type="checkbox"/> Charity or community organisation | <input type="checkbox"/> Liquor outlet                   | <input type="checkbox"/> Seafood            |
| <input type="checkbox"/> Childcare                         | <input type="checkbox"/> Manufacturer                    | <input type="checkbox"/> Supermarket        |
| <input type="checkbox"/> Confectionary                     | <input type="checkbox"/> Market stall <b>(2)</b>         | <input type="checkbox"/> Take away          |
| <input type="checkbox"/> Delicatessen                      | <input type="checkbox"/> Milk vendor                     | <input type="checkbox"/> Wholesaler         |
| <input type="checkbox"/> Fruit and vegetables              | <input type="checkbox"/> Mobile food premises <b>(3)</b> |                                             |

**(1) A home business** uses their home (or someone else's) to handle food for sale. This includes preparing food for local markets or school canteens, catering for events, and online food sales from home. Only shelf stable low-risk food can be prepared for sale in a home business unless there is a separate approved commercial kitchen.

**(2) A market stall** is a structure that is set up to handle or sell food for occasional events such as festival, shows or fetes usually lasting a day or a weekend.

**(3) A mobile food premises** includes any vehicle (mobile or stationary) that is used for preparing and handling food for sale. Examples include vans used for making and selling hamburgers, hot dogs, hot chips, coffee, popcorn, ice-cream, etc.

**Risk foods**

Will you provide or manufacture any of the following foods?  
(Select all options that apply)

- |                                                               |                                                                              |
|---------------------------------------------------------------|------------------------------------------------------------------------------|
| <input type="checkbox"/> Bread, pastries or cakes             | <input type="checkbox"/> Prepared, ready-to-eat, table meals                 |
| <input type="checkbox"/> Confectionary                        | <input type="checkbox"/> Prepared salads                                     |
| <input type="checkbox"/> Cooked rice or noodles               | <input type="checkbox"/> Processed fruit and vegetables                      |
| <input type="checkbox"/> Dairy products                       | <input type="checkbox"/> Processed meat, poultry or seafood                  |
| <input type="checkbox"/> Egg or egg products                  | <input type="checkbox"/> Raw fruit and vegetables                            |
| <input type="checkbox"/> Fermented meat products              | <input type="checkbox"/> Raw meat, poultry or seafood                        |
| <input type="checkbox"/> Frozen meals                         | <input type="checkbox"/> Sandwiches or rolls                                 |
| <input type="checkbox"/> Honey                                | <input type="checkbox"/> Soft drinks or alcohol                              |
| <input type="checkbox"/> Infant or baby foods                 | <input type="checkbox"/> Sous vide foods                                     |
| <input type="checkbox"/> Juices or fermented drinks           | <input type="checkbox"/> Sprouting seeds                                     |
| <input type="checkbox"/> Meat pies, sausage rolls or hot dogs | <input type="checkbox"/> Vacuum- and modified atmosphere-packed chilled food |

Provide a brief description of the items you will process, manufacture, or sell or attach a sample menu.

I have attached a sample menu.

.....

.....

.....

.....

.....

For further information on high / medium risk foods, refer to **Appendix 1 - Potentially hazardous foods** at <https://www.foodstandards.gov.au/publications/Pages/safefoodaustralia3rd16.aspx>

## Section B: Risk classification

If you are not sure how to answer the questions below, please contact the Health Protection Service on 02 5124 9700 or hps@act.gov.au.

### Food type and intended use by customer

(Select only 1 option. If more than one option applies, select the one with the higher score.)

	<u>SCORE</u>
<input type="checkbox"/> You provide <b>high-risk foods</b> that are ready-to-eat (e.g.: oysters, salami, cooked rice, tofu, cooked chicken/meats, cooked pasta, pies, sushi type products, quiches, cream/custard filled cakes (including imitation cream).	35
<input type="checkbox"/> You provide <b>medium-risk foods</b> that are ready-to-eat (e.g.: orange juice, ice cream, peanut butter, pasteurised milk, canned meat, cut fruit, dairy products).	25
<input type="checkbox"/> You provide <b>high-risk foods</b> that are <b>not</b> ready-to-eat (e.g.: raw meats and raw seafood).	15
<input type="checkbox"/> You provide <b>medium-risk foods</b> that are <b>not</b> ready-to-eat (e.g.: unprocessed fruit and vegetables).	5
<input type="checkbox"/> You provide <b>low-risk foods</b> that may or may not be ready-to-eat (e.g.: carbonated beverages, grains, cereals, sugar-based confectionery, alcohol, fats and oils).	0

Food type score:

**Activity of food business** (Select only 1 option. If more than one option applies, select the one with the higher score.)

	<u>SCORE</u>
<input type="checkbox"/> You handle high and medium-risk ready-to-eat foods during the processing or manufacturing of food.	25
<input type="checkbox"/> You portion high and medium-risk ready-to-eat foods before receipt by the customer.	20
<input type="checkbox"/> You handle low-risk or non-ready-to-eat foods during the processing or manufacturing of food.	15
<input type="checkbox"/> You only store, distribute or sell pre-packaged foods.	5

Activity score:

**Off-site catering** (Select only 1 option. If more than one option applies, select the one with the higher score.)

- |                                                                                                                                                                                                                                                                                                                                              | <u>SCORE</u> |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| <input type="checkbox"/> You are a catering business that serves food at a different location to where it is prepared.<br>Serving includes slicing, plating or further processing at a different location to where the food is prepared. Serving does <b>not</b> include delivery services or transport to another registered food business. | 15           |
| <input type="checkbox"/> You are a food business that serves food at the same location at which it is prepared (includes takeaway/delivery services and manufacturers).                                                                                                                                                                      | 0            |

Off-site catering score:

**Method of processing** (Select only 1 option. If more than one option applies, select the one with the higher score.)

- |                                                                                                                                                                                                                                               | <u>SCORE</u> |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| <input type="checkbox"/> You cook the food you serve or otherwise provide a pathogen reduction step such as canning, fermentation, pasteurisation or any other step that is capable of significantly reducing the level of pathogens present. | -10          |
| <input type="checkbox"/> You sell uncooked high risk foods, such as sushi, and do not use a pathogen reduction step during processing prior to sale.                                                                                          | 0            |

Method of processing score:

**Customer base** (Select only 1 option. If more than one option applies, select the one with the higher score.)

- |                                                                                                                                         | <u>SCORE</u> |
|-----------------------------------------------------------------------------------------------------------------------------------------|--------------|
| <input type="checkbox"/> You are a small business (fewer than 10 employees in service sector and less than 50 in manufacturing sector). | 5            |
| <input type="checkbox"/> You are not a small business.                                                                                  | 10           |

Off-site catering score:

**Supply of food to at-risk groups** (Select only 1 option. If more than one option applies, select the one with the higher score.)

	<u>SCORE</u>
<input type="checkbox"/> You supply food directly to at risk groups. For example, you supply foods directly and specifically to organisations that cater to the sick, elderly, children under 5 years of age or pregnant women (such as hospitals, nursing homes or childcare centres).	20
<input type="checkbox"/> You do not supply food to at risk groups For example, you supply to general public.	0

Supply of food to at-risk groups score:

Add together all your risk scores:

Food type score	
Activity score	
Off-site catering score	
Method of processing score	
Customer base score	
Supply of food to at-risk groups score	
<b>TOTAL</b>	

**Your risk rating**

Compare the total score above to determine your risk rating.

- Total score 39 or less: **Low**
- Total score 40 to 64: **Medium**
- Total score 65+: **High**

## Section C: Ownership type

Registration is issued to the owner of the business, who is the person(s) who will have the overall responsibility for the business, including responsibility for any contraventions of the **Food Act 2001**.

**Trusts will not be registered**, companies operating as trustees for a trust will be registered in the company name only.

**Applications listing a partnership as the owner will not be accepted.** If your business is operated by a partnership, one or more of the individuals of the partnership will need to be listed.

You are applying for a registration as (select 1):

- A corporation → **Complete section D**
- An individual (or individuals) → **Complete section E for each owner**



## Section D: Owner details – Corporation

Complete this section **only** if you selected **'a corporation'** in Section C.

### Company name

As shown on your company extract

.....

### Corporation type

- Company
- Incorporated association
- Government agency
- Registered charitable organisation

**Australian Company Number (ACN):** .....

### Registered company address

Address .....

.....

Suburb ..... State ..... Postcode .....

### Owner postal address

Address .....

.....

Suburb ..... State ..... Postcode .....

### Owner phone numbers

Phone (BH) ..... Phone (AH) .....

Mobile .....

**Email** ..... (required)

### Proof of identification

To protect public health, the Health Protection Service needs to be able to confirm the identity of applicants.

You must provide one piece of photographic identification for the authorised agent who is making the application.

The preferred types of identification are:

- Driver licence
- Passport
- Proof of Identity card or Proof of Age card

If you bring your identification to the Health Protection Service in person, we will make a copy for you.

I have attached photographic identification for the authorised agent.

### Company extract

You must also provide a copy of a current company extract issued by the Australian Securities and Investment Commission (ASIC) **issued within the last 30 days**. The Company Extract includes details of the corporate, business names and trading names, present directorships and proprietorships of the company.

You can obtain a current company extract from ASIC at [asic.gov.au](http://asic.gov.au)

I have attached a current company extract issued within the last 30 days.

### Declaration

This declaration must be made by the authorised agent of the corporation.

I, ....., confirm that the information supplied in this section is true and accurate, and understand that the provision of false or misleading information is an offence.

Position title .....

Signature of agent .....

Date .....

## Section E: Owner details – Individual

Complete this section **only** if you selected **'an individual (or individuals)'** in Section C.

If there are multiple owners, make additional copies of this section for **each owner**.

### Your full name

As shown on your photographic identification

Title (Mr, Ms) ..... Given name(s) .....

Surname .....

### Residential address

Address .....

.....

Suburb ..... State ..... Postcode .....

### Owner postal address

Address .....

.....

Suburb ..... State ..... Postcode .....

### Owner phone numbers

Phone (BH) ..... Phone (AH) .....

Mobile .....

Email ..... (required)

**Proof of identification**

To protect public health, the Health Protection Service needs to be able to confirm the identity of applicants.

You must provide one piece of photographic identification for each owner.

The preferred types of identification are:

- Driver licence
- Passport
- Proof of Identity card or Proof of Age card

If you bring your identification to the Health Protection Service in person, we will make a copy for you.

I have attached photographic identification for this owner.

**Declaration**

This declaration must be made by each owner.

I, ....., confirm that the information supplied in this section is true and accurate, and understand that the provision of false or misleading information is an offence.

Signature .....

Date .....

## Section F: Business details

### Proposed opening date

..... / ..... / .....

### Likely days of operation and hours of trade

What days and hours do you plan to trade (for example, "Monday to Friday, 9am - 5pm")

.....  
.....  
.....

### Business on-site or primary contact person

Who can we contact about the day-to-day operation of the business?

Title (Mr, Ms) ..... Given name(s) .....  
Surname .....

### On-site or primary contact person phone numbers

Phone (BH) ..... Phone (AH) .....

Mobile .....

Email .....(required)

### Business correspondence postal address

Address .....

.....

Suburb ..... State ..... Postcode .....

**Physical address of business**

If you selected **mobile food premises** in Section A, enter the **address where your vehicle is usually garaged**.

If you selected **market stall** in Section A, **skip to the following question**.

Address .....

.....

Suburb ..... State ..... Postcode .....

**Where you usually trade (market stalls only)**

.....

.....

.....

**Vehicle registration (mobile food premises only)**

Registration number ..... State of registration .....

## Section G: Food safety supervisors

All registered food businesses in the ACT must appoint a food safety supervisor.

You have 30 days after registration to notify Health Protection Service of your food safety supervisors. If you have these details now you can include them in your application here.

For more information, visit [health.act.gov.au/businesses/food-safety-regulation](http://health.act.gov.au/businesses/food-safety-regulation)

If you know your food safety supervisor details, you can notify them now: You can notify up to 4 food safety supervisors.

### Food safety supervisor 1

Name .....

Phone .....

Date training certificate issued ..... / ..... / .....

### Food safety supervisor 2

Name .....

Phone .....

Date training certificate issued ..... / ..... / .....

### Food safety supervisor 3

Name .....

Phone .....

Date training certificate issued ..... / ..... / .....

### Food safety supervisor 4

Name .....

Phone .....

Date training certificate issued ..... / ..... / .....

I have attached copies of my nominated food safety supervisor certificates (optional).

## Section H: Fit-out plan assessment

The construction and layout of a food business are important to food safety. Suitably detailed plans and specifications must be submitted to the Health Protection Service and an inspection carried out before a new registration can be granted.

The **Food Business Fit-out Guide** assists in the designing of new food businesses. The **Mobile Food Business Fit-out Guide** assists in the design and construction of mobile food businesses in the ACT. We recommend all food business owners, designers and builders use these guides as a reference when working with food premises. Both these guides are available at <https://health.act.gov.au/businesses/food-safety-regulation/starting-food-business> or by contacting the Health Protection Service.

Have you already submitted a Fit-out Plan Assessment Application to the Health Protection Service?

Yes → **Skip to section I: Fees and payment**

No

Did you select **home business** or **market stall** as your food business type in Section A **AND** did your risk classification calculate as **low** in Section B?

Yes → **Complete section H-1: Low risk plan assessment below**

No → **Complete section H-2: Standard fit-out plan assessment (next page)**

### Section H-1: Low risk plan assessment

#### Low-risk home businesses and market stalls only

You do not have to complete a standard fit-out plan assessment application, but you do need to provide us some information about your business so that we can make an assessment.

I have attached a floor plan that shows the layout of my home food business or market stall.

*You can draw the floor plan yourself. Please see the Food Stall Guidelines at <https://www.health.act.gov.au/businesses/food-safety-regulation/food-safety-training-and-resources> for an example.*

I have attached photos of my home food business or market stall, including preparation areas and handwashing facilities.



## Section H-2: Standard fit-out plan assessment

I have attached plans, with elevations, specifications and details of all fixtures, fittings, equipment, and surface finishes.

Was the premises previously used as a food business?

Yes → Previous registration number (if known) .....  
Previous trading name .....

No

Are you relocating your food business from another site?

Yes → Registration number .....  
Trading name .....

No

To assist the processing of your application, we may want to contact your builder or building certifier to confirm details of your fit out. Which details will you provide?

The builder who is completing your fit out → **Complete below**

The building certifier who will certify your fit out → **Complete below**

You do not know these details or you do not give your consent for us to contact.

### **Builder/building certifier**

Name .....

Company .....

Phone ..... Mobile .....

Email .....

I give my consent for the Health Protection Service to contact the builder/certifier above to confirm details of my fit out.

**Note:** The plan assessment process, in terms of conducting a food business under the *Food Act 2007*, does not constitute any authority to:

- Carry out any building works or occupy the building or part of the building unless all relevant building permits are obtained from all responsible authorities;
- Use the land or buildings thereon for any purpose which requires a planning permit unless all relevant planning permits are obtained from all responsible authorities; and
- Commence the operation of the food business, unless approval has been sought from the Health Protection Service and the business is registered under the *Food Act 2007*.

If the fit out changes the operation of the business in a way that may have an effect on the safety of the food intended for sale, the proprietor must give notice of the change to the Health Protection Service within 7 days of the changes happening. If these changes include a structural change or changes in the fixtures and fittings of the premises, we advise that you notify us of these proposed changes at least 14 days before works are to commence so that they can be assessed by a Public Health Officer.

## Section I: Fees and payment

Do you want to apply for a fee-exempt application?

- Yes → Complete **fee exemption details** below
- No → Skip to **payment details**

### Fee exemption details (fee exempt applications only)

Which fee-exempt category/categories apply to this business?

The food business supplies food in the course of providing services to people:  
(select all that apply)

- in a correctional centre under the *Corrections Management Act 2007*.
- in a detention place or therapeutic protection place under the *Children and Young People Act 2008*.
- for a hospice, hospital, nursing home or other health facility operated by or on behalf of the territory.
- in a health care facility licenced under the *Public Health Act 1997* who are contracted to supply food to patients under care of the facility.
- at a pre-school, primary school, high school or secondary college (educational place) from a canteen operated either by the educational place or by the parents and citizens association of the educational place.
- in a childcare centre licenced as a childcare service under the *Children and Young People Act 2008*.
- in a childcare centre that holds a current service approval under the *Education and Care Services National Law (ACT) Act 2011*.
- by a charitable organisation that is a charity endorsed under subdivision 50-B of the *Income Tax Assessment Act 1997 (Cwlth)*.
- by a crisis accommodation provider declared under the *Residential Tenancies Act 1997*.
- by a community organisation (see note below) that is not a charity under subdivision 50-B of the *Income Tax Assessment Act 1997 (Cwlth)*.
- The food business is a registered training organisation whose purpose in the provision or offering of courses that involve the handling of food intended for sale or the sale of food (e.g., a hospitality school).

**Note:** A community organisation as referred to above means a society, association or other body, whether incorporated or not under the *Associations Incorporations Act 1991*, that is not carried on for the pecuniary profit or gain of its members and that is engaged in the ACT in any of the following activities:

- a religious, educational, charitable or benevolent purpose;
- promoting or encouraging literature, science or the arts;
- looking after, or giving attention to, people who need care because of a physical or mental disability or condition;
- sport, recreation or amusement;
- conserving resources or protecting the natural environment from harm;
- preserving historical or cultural heritage;
- a political purpose; or
- protecting or promoting the common interests of the community generally or a particular section of the community.

**Evidence of fee exemption (fee exempt applications only)**

To claim exemption from payment of a fee you need to provide evidence of your exemption status. The evidence needed to establish exemption from payment of fees will vary depending on the type of organisation.

- For charities, evidence of registration as a charity with the Australian Charities and Not-for-Profits Commission (the ACNC) is preferred.
- For organisations such as health care facilities and childcare services, a licence under ACT legislation will need to be produced to claim fee exempt status.
- For other organisations, such as sporting clubs and community groups, evidence of incorporation under the Associations Incorporation Act 1991 is preferred.

I have attached evidence of my fee exempt status.

**Registration duration (all applications)**

You can choose to register your business for 1, 2 or 3 years. The Health Protection Service will send you a reminder notice 3-4 weeks prior to the registration renewal date.

How many years would you like to register for?

(Refer to your risk classification in section B)

Low risk		Medium risk		High risk	
<input type="checkbox"/> 1 year	\$152.50	<input type="checkbox"/> 1 year	\$224.10	<input type="checkbox"/> 1 year	\$300.90
<input type="checkbox"/> 2 years	\$305	<input type="checkbox"/> 2 years	\$448.20	<input type="checkbox"/> 2 years	\$601.80
<input type="checkbox"/> 3 years	\$457.50	<input type="checkbox"/> 3 years	\$672.30	<input type="checkbox"/> 3 years	\$902.70

**GST is not applicable** under section 81-5 of the *A New Tax System (Goods and Services Tax) Act 1999*.

**Payment details**

Do not complete these details if you are applying for a fee-exempt application.

Payment method

- EFTPOS (in person at the Health Protection Service)
- Cheque
- Credit card (complete details below)

**Credit card details (if paying by credit card)**

I agree to this credit card being debited the required fee and the credit card details being destroyed after the transaction is processed.

Cardholder name .....

Signature .....

Date .....

Daytime phone .....

Credit card type

- Visa
- Mastercard

Credit card number

--	--	--	--	--	--	--	--	--	--	--	--

Expiry (MM/YY)

		/		
--	--	---	--	--

## Section J: Declaration

I declare that:

- I am authorised to supply all the information in this form;
- that all the information supplied on this form is true and correct; and
- that there are necessary records and/or documentation to support this registration application.

I understand that failure to submit all required information and documentation may delay my application and that the provision of false or misleading information may be a criminal offence.

Name .....

Position title ..... (If applying as a company)

Signature of agent ..... Date .....

## Section K: Checklist

It is recommended that you use the checklist below to ensure that your application is complete.

- I have read the Food Business Registration Information Sheet at [health.act.gov.au/businesses/food-safety-regulation/starting-food-business](http://health.act.gov.au/businesses/food-safety-regulation/starting-food-business)
- I have completed Section A: Trading details.
- I have completed Section B: Risk classification.
- I have completed Section C: Ownership type.
- I have completed Section D: Owner details – Corporation **or** Section E: Owner details – Individual **for each listed owner**.
- I have attached photographic identification for the authorised agent (corporation owner) or **for each listed owner** (individual owner/s).
- I have completed Section F: Business details.
- I have completed Section G: Food safety supervisors (optional).
- I have completed Section H: Fit-out plan assessment.
- I have attached a set of plans and/or photos (or I have already submitted these to the Health Protection Service).
- I have completed Section I: Fees and payment.
- I have attached payment **or** I have attached evidence of fee exemption.
- I have signed the declaration in Section J: Declaration.